Form A- Name Change of Individual

INSTRUCTIONS FOR CHANGE OF NAME

Please read the Instructions for Change of Name carefully or have someone explain them to you. You may use the forms attached or you may re-type the forms using the identical format provided by the Office of the Lieutenant Governor. **All forms must be typed**. Forms may be copied.

THE FOLLOWING FORMS ARE INCLUDED IN THIS PACKET AND MUST BE SUBMITTED UPON COMPLETION:

PETITION

FACT SHEET

NOTICE OF CHANGE OF NAME

ORDER

INSTRUCTIONS FOR COMPLETING THE PETITION (pages 5 to 7)

- (1) This is the official heading. <u>Type</u> in your **full**, **legal name**, which would be your name exactly as it appears on your birth certificate unless you have subsequently married or legally, changed your name. **DO NOT TYPE IN THE NAME YOU ARE USING NOW UNLESS IT IS YOUR LEGAL NAME.**
- (2) Type your full, legal name in the space.
- (3) Type in either "his" or "her" in the space provided.
- (4) Type in all information requested. Type in both your mother and father's names as it appears on your birth certificate. If your father's name is not listed on the birth certificate, type in "unknown".
- (5) Type in the name that appears on your Birth Certificate or Certificate of Naturalization.
- (6) Type in all other names you have used even if they were not legal names. If your name has been changed previously, provide the former name, date and the place where the name change(s) was granted. This includes divorced persons whose divorce decree changes their names.
- (7) You must provide a street address. For those islands in those locations where there are no street addresses you may use a P.O. Box, but please describe the general location of your residence.

- (8) Check the appropriate response. If Petitioner has been convicted of a felony, please state the type and date of conviction, and final disposition of the case. Fully explain the charges, the sentence, the terms of parole or probation, the date of final discharge of the sentence, whether there was a delayed acceptance of a guilty plea, if there was a pardon, by who the pardon was granted.
- (9) Type in your new name exactly as you want it spelled once it is legally changed.
- (10) Type in your full legal name and your new name exactly as you want it spelled. Make sure you date the petition here, either at the time you have it notarized or before you have it notarized. If you date after it is notarized, it will not be processed.
- (11) Sign the petition in black ink, exactly as it is typed in the heading. DO NOT USE INITIALS OR NICKNAMES IN THE SIGNATURE.
- (12) This is the notarized acknowledgment, which must be included with every petition. Type in your legal name, exactly as it is in the heading.
- (13) Sign this in front of the notary, in black ink, exactly as your name appears in the heading. DO NOT USE INITIALS OR NICKNAMES IN THE SIGNATURE. The notary will complete their portion of this page.

INSTRUCTIONS FOR COMPLETING THE NOTICE OF CHANGE OF NAME (page 9)

- At the top of the page, type your name, address and telephone number in the space provided;
- Type in the full, legal name in the heading exactly as you did on the Petition;
- Also type your legal name in the next two (2) spaces on the document (please note: one space per line);
- The new name on the third space and the name of the newspaper you've chosen for publication of the name change legal ad (one day only).

Submit one (1) original of NOTICE OF CHANGE OF NAME. Copies are not required. Once your Petition has been approved, the Lieutenant Governor will sign the NOTICE and it will be returned to you. You take the NOTICE to the newspaper agency for publication. The NOTICE of Change of Name must be published in the newspaper and an affidavit executed within sixty (60) calendar days after the Lieutenant Governor signs it. Failure to publish within the time required automatically voids the petition for change of name.

The petitioner must make sure the newspaper will mail the AFFIDAVIT of publication to our office within sixty (60) days of publishing and a copy of the AFFIDAVIT to you for your files. If we do not receive an AFFIDAVIT from the newspaper at the end of sixty (60) days, we will assume that you did not have the change of name published and your petition will be voided. NOTE: The newspaper provides the affidavit; you do not have to provide that form.

INSTRUCTIONS FOR COMPLETING THE ORDER (pages 10 to 11)

- Halfway down the page, type your name, address and telephone number in the space provided;
- Type in your full, legal name in the heading exactly as you did on the Petition;
- Leave the spaces for the date in the body of the document blank, but type in your legal name and your new name in the proper spaces;
- We will fill in the date of publication and date of the Lieutenant Governor's signature;

Once our office receives the AFFIDAVIT from the newspaper showing publication of your name change, the Lieutenant Governor will sign the administrative ORDER and it will be sent to you. You must file a copy of the ORDER with the Bureau of Conveyances within sixty (60) days after the signing of the ORDER, (See H.R.S. 574-6b).

The Office of the Lieutenant Governor cannot give legal advice regarding name changes. We can only answer questions related to the procedures in granting name changes. IF YOU HAVE LEGAL QUESTIONS, YOU SHOULD CONTACT AN ATTORNEY.

Mail the documents to:

Office of the Lieutenant Governor P.O. Box 3226 Honolulu, Hawaii 96801

Or deliver documents to:

Office of the Lieutenant Governor State Capitol 415 South Beretania Street, 5th Floor Honolulu, Hawaii 96813

For additional information, call (808) 586-0255.

The following must be submitted to the Lieutenant Governor's Office.

BIRTH CERTIFICATE- a certified copy of your original birth certificate from the state you were born, not older than 90 days prior to submission of your name change forms; foreign birth certificates (must be translated into English); original Certificate of Naturalization or alien registration card and Passport
 PETITION - notarized within 30 days prior to submission of name change forms
 FACT SHEET
 NOTICE OF CHANGE OF NAME
 ORDER- plus five (5) copies
 NON-REFUNDABLE FILING FEE- Money order or check made payable to the Office of the Lieutenant Governor in the amount of \$50.00; cash is accepted when you hand carry your documents
 Marriage Certificate, Divorce Decree, Death Certificate, Paternity Documents, Adoption Decree, Guardianship documents, prior name change decree, if applicable (copies acceptable)
Petitions with liquid paper corrections must be initialed by the notary

A PETITION CONTAINING TYPOGRAPHICAL ERRORS, MISSING INFORMATION OR OTHERWISE NOT IN CONFORMANCE WITH THESE INSTRUCTIONS WILL NOT BE ACCEPTED FOR PROCESSING.

IN THE OFFICE OF THE LIEUTENANT GOVERNOR

OF THE STATE OF HAWAII

In the Matter of the P	etition)	
of))	
For Change of Name)))	
	PE	TITION	
TO THE HON STATE OF HAWAII		AIONA, JR., LIEUTE	NANT GOVERNOR OF TH
COMES NOV	V		
your petitioner herein	, and respectfully pray	that an order be entere	d herein
changing nam	e and in support thereo	f represents as follows	:
		I.	
That your Peti	tioner's date of birth is		
place of birth is			
father's name is			
mother's maiden nam	(Name as shown on bi	•	
motion 5 marden nam	(First)	(Middle)	(Surname)
		II.	
That the name	on your Petitioner's bi	rth certificate or certif	icate of naturalization is
(First)	(Middl	a)	(Surname)

That other	names Petitioner is using or has used are as fo	ollows:
	IV.	
That your F	Petitioner is a resident of the State of	
and Petition	ner's present address is(Residence address)	
	V.	
Tha	nt your Petitioner:	
	has not been convicted of a felony.	
	has been convicted of a felony.	
Felony	Date of Conviction	Disposition
If Petitione	r has been convicted of a felony, respond to th	ne following questions:
1.	Fully explain the charges.	
2.	Fully explain the sentence.	
3.	Fully explain the terms of parole or proba	tion.
4.	Fully explain the date of final discharge of	of the sentence.
5.	Fully explain whether there was a delayed	l acceptance of a guilty plea.
6.	Fully explain if there was a pardon, by wh	nom the pardon was granted.

That this Petition is not filed for the purpose of avoiding payment of debts to creditors; your Petitioner has been and is a good law-abiding citizen and your Petitioner states that this Petition for Change of Name is not for wrong or fraudulent purposes.

VII.

	That your Petitioner is now	reques	ting a Change	of Name to		
(9)						
	WHEREFORE, your Petition	oner pra	ays that an ord	er be entered	l herein Changin	g Petitioner's
(10)	name from				to	
	DAT	ED:				Hawaii
					(City)	
(11)			Petitioner (Sign name in	ı full)	
STA	ΓΕ OF HAWAII)				
COU	NTY OF(Honolulu, Hawaii, Maui, Kau) _) 1ai)	SS.			
(12)	(Name of Petitioner)				, being first duly	sworn on oath
	(Name of Petitioner) deposes and says:					
	That Petitioner is the person	n name	d herein, that I	Petitioner has	s read the foregoi	ng Petition,
	knows the contents thereof, and that	at the sa	ame is true to t	he best of th	e Petitioner's kno	owledge.
(13)		Petit	ioner (Sign na	me in full)		
Subse	cribed and sworn to before me					
this _	day of 20	_				
	ry Public, State of Hawaii					

FACT SHEET

Petitioner shall answer the following	questions fully and	completely and	submit this FACT	SHEET v	with
your Petition for Change of Name.					

1.	What is the name on your Birth Certificate? What is the File No?		Dated		
2.	What is the name on yo	our Certificate of Naturali	zation?	What is the No?	Dated
3.	What name appears on	your social security card	?		
4.	What name do you use	in your employment?			
5. <u>Marrie</u>		es, divorces, dates and pl <u>Date of Marriage</u>	aces thereo		e of Marriage
<u>Divorc</u>	eed From	Date of Divorce		<u>Plac</u>	e of Divorce
6. <u>Name</u>	List the names, date an	d place of birth of all you <u>Date of Birth</u>	r living ch		e of Birth
7.	What is the reason for	egalizing this name chan	ge?		
8.		he State of Hawaii, and w 1) Birth Certificate (2) M			th certificate amended
(1)	First name	Middle Na	me	Last	Name
(2)	First Name Cannot be	Amended			
` '		Middle Na			Name

Name: Address: City, State, Zip Code: Telephone #:	
IN THE	OFFICE OF THE LIEUTENANT GOVERNOR
	STATE OF HAWAII
In the Matter of the Petition of For Change of Name	
	NOTICE OF CHANGE OF NAME
Upon consideration o	of the Petition of
and there appearing to me to be good	d reasons for granting the same:
NOW, THEREFORE	E, by virtue of the authority vested in me by law and thereunto
enabling, I, James R. Aiona, Jr., Lieu	utenant Governor of the State of Hawaii, do hereby give public notice
that the name of	shall be
changed to	upon a single publication in
in the, Hawaii.	, a newspaper of general circulation in the State of Hawaii, published at
	DATED: Honolulu, Hawaii

JAMES R. AIONA, JR. Lieutenant Governor of the State of Hawaii

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LAND COURT	,	REGULAR SYSTEM
Name:		
Address:		
City, State, Zip Code: Telephone #:		
Telephone #.		
IN THE OFF	ICE OF THE LIEUTENA	ANT GOVERNOR
	STATE OF HAWAII	Ī
In the Matter of the Petition)	
)	
of)	
)	
For Change of Name)	
)	
	ORDER	
The Natice of Change of Name of	f	
The Notice of Change of Name of	1	
having been published on	in a newspaper of gen	neral circulation in the State of Hawaii,
I, James R. Aiona, Jr., Lieutenant Govern	nor of the State of Hawaii.	, by virtue of the authority vested in me

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by law and thereunte	o enabling, do hereby order that the name of
	be changed to
effective	
	Dated: Honolulu, Hawaii
	JAMES R. AIONA, JR.
	Lieutenant Governor of the State of Hawaii

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SURVEY SHEET ON VOTER REGISTRATION FOR AMERICAN CITIZENS ONLY

(CH	ECK O	NLY <u>ONE</u>)		
	I am	not a registered voter and I am NOT interested in reg STOP. DO NOT FILL OUT OR SIGN THIS FOR		
	I am	NOT a registered voter, but would like to register to	vote under my new name.	
	I am	a registered voter and would like my name changed PLEASE COMPLETE THIS FORM, SIGN IT AN FORMS.		<u>1G</u>]
	I am	a registered voter and would like my name <u>and</u> addre <u>PLEASE COMPLETE THIS FORM, SIGN IT AN FORM.</u>	<u> </u>	<u>1G</u>]
the i	nformated by th	nave your name changed legally, you need to change yetion below and return this form with your name change he Lieutenant Governor, your voter registration will a	ge Petition. When your name change order	is
	1.	I am a registered voter on	(Island)	
	2.	My name is being changed from	to	
	3.	My residence address is		
	4.	My telephone number is (home)	(work)	
	5.	My mailing address is		
	6.	My social security number is		
	7.	My date of birth is		
	****	Signature (New nan	,	
	(FOR	OFFICE USE ONLY)		
	Nam	ne Change Effective on: Date grante	ed by Lt. Governor	

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